## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (57)-273-2885

maintenance fee notificat		erwise in block 1, by (a	Note Note	: A certificate of	mailing	can only be used for	hould be completed where correspondence address as arate "FEE ADDRESS" for or domestic mailings of the for any other accompanying int or formal drawing, must
BAKER BOTT 2001 ROSS AVI SUITE 600		Cer	tificate	of Mailine or Trans			
DALLAS, TX 7	5201-2980						(Depositor's name)
							(Signature)
			L				(Due)
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO. CON		CONFIRMATION NO.
10/648,580 08/25/2003			Richard Harvey 063170.6			063170.6292	4093
TITLE OF INVENTION	: WEB SERVICES APP	ARATUS AND METHO	DS				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUI	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0		\$1810	12/20/2010
EXAMINER		ART UNIT	CLASS-SUBCLASS	1			
ZHEN, LI B		2194	719-330000	•			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO\SB/1/2) attached.  "Fee Address 'Indication (or 'Fee Address' Indication form PTO\SB/1/2) or more recent) attached. Use of a Customer Number is required.			2. For printing on the pasted front page, list (1) the names of up to 3 registered pasted attorneys or agents OK, alternatively, (2) the name of a single firm theiring as a member a (2) the name of a single firm theiring as a member a (3) registered pattern attorneys or agents. If no name is listed, so name will be printed.				
PLEASE NOTE: Un recordation as set for (A) NAME OF ASSI Computer	less an assignee is ident h in 37 CFR 3.11. Com GNEE Associates Th	ified below, no assignee pletion of this form is NO ink, Inc.	(B) RESIDENCE: (CIT	oatent. If an assign assignment. Y and STATE OR	COUN	TRY)	document has been filed for
Please check the appropr	nate assignee category of						
4a. The following fee(s)    Sale   Issue Fee   Publication Fee (following   Issue Order   Issue Order   Issue Order   Issue   Issue Order   Is	No small entity discount	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hearby suthorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (J2—20.384. (enclose an extra copy of this form).					
5. Change in Entity Sta	ns SMALL ENTITY stat	us. See 37 CFR 1.27.	b. Applicant is no lo				
NOTE: The Issue Fee ar	nd Publication Fee (if records of the United St	uired) will not be accepte ates flatent and Trademari	ed from anyone other than k Office.	the applicant; a reg	gistered	attorney or agent; or	the assignce or other party
Authorized Signature	4	$\mathcal{L}$		Date	11	-19-10	
Typed or printed nan		edersen		Registration	No	45,003	
This collection of inform an application. Confider submitting the complete this form and/or suggest	nation is required by 37 of stiality is governed by 33 of application form to the signs for reducing this but	CFR 1.311. The informati 5 U.S.C. 122 and 37 CFR e USPTO. Time will var- irden, should be sent to the	on is required to obtain or 1.14. This collection is e y depending upon the ind the Chief Information Office	retain a benefit by stimated to take 12 ividual case. Any o cer, U.S. Patent an	the pul minute ommer d Trade	blic which is to file (a es to complete, include ts on the amount of mark Office, U.S. De	nd by the USPTO to proces ling gathering, preparing, ar- time you require to comple spartment of Commerce, P.45 for Patents, P.O. Boy, P.45

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Co Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.